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Bib Data Sheet

CONFIRMATION NO. 2320

SERIAL NUMBER 10/764,903	FILING DATE 01/26/2004  RULE	CLASS 005	GROUP ART UNIT 3673	ATTORNEY DOCKET NO. 3010.2.2CIP
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*

This application is a CIP of 09/150,268 09/09/1998 ABN

## \*\* FOREIGN APPLICATIONS \*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/30/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY UT	SHEETS DRAWING 15	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>	

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## TITLE

Assist device for getting into and out of sitting or prone positions on beds and similar furniture

FILING FEE  RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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